



Clinical Edit Criteria Proposal

Drug/Drug Class Date:	Butorphanol Clinical E June 29, 2011	dit		
Prepared for: Prepared by:	MO HealthNet	MO HealthNet		
New Criteria	a 🔀 R	Revision of Existing Criteria		
Executive Sum	mary			
Purpose:	Ensure appropriate and prudent use HealthNet Pharmacy program.	re appropriate and prudent use of butorphanol within the MO thNet Pharmacy program.		
Why was this Issue Selected:	Butorphanol is a morphine-like synthetic opioid analgesic. It is most closely structurally related to levorphanol and is available only in injectable and intranasal spray formulations. Butorphanol exhibits partial agonist and antagonist activity at the μ opioid receptor and agonist activity at the κ opioid receptor. Stimulation of these receptors on central nervous system neurons causes an intracellular inhibition of adenylate cyclase, closing of influx membrane calcium channels, and opening of membrane potassium channels. This leads to hyperpolarization of the cell memberane potential and suppression of action potential transmission of ascending pain pathways. κ -agonism can cause dysphoria at therapeutic or supertherapeutic doses. This gives butorphanol a lower potential for abuse than other opioid drugs. Butorphanol has FDA approved indications for: pain, labor pain, anesthesia maintenance in balanced anesthesia as an adjunct and premedication for procedures. It is often used in the treatment of migraines but this is not an FDA approved indication. On a mg-to-mg basis, Butorphanol is 5 to 8 times more potent as an analgesic than morphine and 30 to 50 times more potent than meperidine.			
Setting & Population:	Patients 18 years of age and older			
Type of Criteria:	☐ Increased risk of ADE	☐ Non-Preferred Agent		
		☐ Other:		
Data Sources:	☐ Only administrative databases	□ Databases + Prescriber-supplied		

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Program-	Drug	Claims	Expense
Specific	 Butorphanol Nasal Spray 	1,188	\$51,547.00
Information:	 Butorphanol Injection 	50	\$ 854.00
	Totals	1,238	\$52,401.00
		0/0	000 0/0040

9/2009 - 8/2010

Setting & Population

• Age range: Patients 18 years of age or older

Gender: males and females

Approval Criteria

Appropriate diagnosis (see diagnosis table – Appendix A)

• Doses not exceeding recommended maximum doses.

Approval Diagnoses (Appendix A)								
Condition	Submitted ICD-9 Diagnoses	Inferred Drugs**	Date Range	Client Approval				
Cancer	140 – 208	NA	2 years					
	NA	Antineoplastics	12 months					
Chronic nonmalignant pain (CNMP)	282-355 710-733.7	NA	1 year					
	NA	Non-opioid analgesics	90 days					
	625.4		1 year					
Migraine	346.0 – 346.9	5-HT1 Serotonin	1 year					
		Receptor Agonists						

^{**}see Appendix B for product-specific list of Inferred Drugs

Denial Criteria

- Use of more than six canisters per 30 days
 - 15ml per month
- Patients under18 years of age

Required Documentation					
Laboratory results: MedWatch form:		Progress notes:			



Disposition of Edit

• Denial: Edit 682 "Clinical Edit"

References

- 1. Lippincott, Williams, Wilkins. PDR Electronic Library, Montvale NJ; 2010.
- 2. Facts and Comparisons; 2010.
- 3. USPDI, Micromedex, 2010.

